

## BEAVERTON POLICE DEPARTMENT

# GENERAL ORDER

NUMBER: 8.05.00  
SUBJECT: BLOODBORNE PATHOGENS AND OTHER  
HAZARDOUS MATERIALS  
EFFECTIVE: AUGUST 1, 1999  
REVIEW: AUGUST 2001, 2003, 2005, 2007

1. PURPOSE. Employees of the city provide services to citizens who may require employees to come into contact with bodily fluids, such as blood or other potentially infectious materials. This can occur as a regular part of the duties of emergency responders, firefighters and paramedics, law enforcement officers; a corrections officer, evidence handlers, health care workers, maintenance workers, or a person giving first aid to another. There are a variety of methods by which this exposure may occur.

2. POLICY. Exposure to a bloodborne pathogen may lead to sickness such as hepatitis, AIDS, or malaria. The city wants to assure its employees of a safe and healthy work environment. It is the policy of the city to comply with all legal and regulatory obligations for the prevention of exposure to bloodborne pathogens. To this end, the city will comply with all sections of the Oregon Administrative Rules, Chapter 437 and all other statutory requirements regarding the prevention of occupational exposures to bloodborne pathogens. The city will identify each classification and position the duties of which could lead to exposure, identify the nature of exposure, and insure that equipment, training and appropriate procedures are in place. These shall be grouped as Class 1 (all employees could be exposed) and Class 2 (some employees could be exposed).

3. EXPOSURES. In the event of exposure to body fluids under circumstances that could present a risk of infectious exposure, a report will be made to the occupational Health Nurse as soon as possible. If confirmed, the Occupational health nurse may solicit the cooperation of the source person through voluntary testing with informed consent. In order to protect the employee, a baseline test will be made within the week following exposure and at three-month intervals for one year. The Occupational Health Nurse will ensure that the employee involved receives counseling appropriate for the circumstances. All testing will be preceded by informed consent and written authorization.

4. UNIVERSAL HEALTH PRECAUTIONS AND WORK PRACTICES. As recommended by public health authorities, the city will adhere to a program of universal precautions for protection against diseases spread by blood or bodily fluids. ("Bodily fluids" refers to fluids that may contain blood or feces, not urine, sweat, saliva or tears.) This means that, for safety purposes, employees will operate on the assumption that all blood and body fluids are potential carriers of a bloodborne disease and will adhere to universal precautions protect against AIDS and other diseases. The following general precautions will be followed:

A. Eating, drinking, smoking, applying cosmetics, lip balm or handling contact lenses are prohibited in the work areas, including field locations, where there is an anticipated exposure to bloodborne pathogens.

B. The Oregon Administrative Rules mandate Universal Precautions at all times to prevent contact with blood or other potentially infectious materials. It is difficult or impossible to differentiate between body fluid types under circumstances present in the workplace. Therefore, ALL BODY FLUIDS SHALL BE CONSIDERED POTENTIALLY INFECTIOUS MATERIALS, including blood and tissue or organs from either a living or dead human.

C. Any employee cleaning up a spill of blood or bodily fluids or rendering emergency medical assistance will wear appropriate protective gear (such as latex gloves and a mask);

D. Protective gear for cleaning blood or body fluid spills will be provided by the city and will be located near any area determined to be a site of such a spill, in emergency response vehicles, and at first aid stations.

E. An employee rendering medical assistance, which may expose the employee to blood or bodily fluids, will take precautions against contamination (such as wearing latex gloves while bandaging a bleeding wound, or using a disposable mouthpiece for CPR. An employee exposed to blood or bodily fluids will scrub with soap and water, removing rings, watch and jewelry as soon as practical after providing medical assistance.

F. Gloves and one-way CPR masks shall be available in all first aid kits.

G. Hand washing facilities shall be provided at all locations where there is anticipated exposure to bloodborne pathogens. If the anticipated exposure is to a crew working in the field, an approved portable pressure tank may be used. There

shall be a sufficient amount of soap and water to wash the greatest number of washings on a crew. Where the anticipated exposure to an individuals at a place where hand-washing facilities are not available, antiseptic hand cleaner or towelett shall be readily accessible and shall be used. However, if antiseptic hand cleaner or towelett are used, the exposed areas shall be washed with soap and water as soon as possible after removal of the personal protective equipment.

H. Contaminated syringes or needles shall be handled only in accordance with approved available methods or with approved devices. Needles shall not be bent, recapped, or removed unless authorized and the employee is specifically trained to do so.

I. If potentially contaminated syringes or needles are discovered the devices shall be placed in approved containers. After securing in an approved container, the item shall be delivered to the County Health Department or to a medical service provider for disposition.

J. Equipment which may become contaminated with blood or other potentially infectious materials, shall be examined prior to servicing and shall be decontaminated as necessary. Emergency service equipment may be used while contaminated to complete the assignment. However, upon completion of the immediate assignment, vehicles and equipment shall be removed from service and the contaminated area decontaminated prior to the next use. The contaminated area shall be identified with an approved BIOHAZARD label, and all affected employees, including maintenance personnel shall be informed of the hazard, until decontaminated.

Any additional precautions applicable to specific job functions, as well as any further general precautions, will be conveyed through employee training sessions, educational material, or more specific departmental policy.

## 5. CRIMINAL INVESTIGATIONS AND SPECIFIC SAFETY PRECAUTIONS.

### A. Crime Scene Processing

1. Wear appropriate protective gloves and clothing as necessary to prevent direct contact with blood and body fluids.
2. Utilize proper evidence collection techniques and exercise extreme care when searching hidden areas, such as in dresser drawers, pockets, and any area that cannot be directly seen while searching.

3. Refrain from eating, drinking and smoking or applying makeup at any contaminated scene. Also, be careful to keep hands away from face, especially the mouth and eyes when handling evidence or when in contact with fluids.

B. Decontamination Procedures

1. Members should properly dispose of any protective gloves and clothing used at the scene, and should thoroughly wash with a disinfectant.

2. Any equipment used at the crime scene should be decontaminated with an appropriate disinfectant before being handled or put away.

3. Precautions should be taken to decontaminate the scene of any suspected infected blood or body fluid to prevent contamination of other individuals.

4. Contaminated waste warnings should be issued to other agencies and personnel to whom the crime scene may be relinquished. Biohazard emblems shall be placed when and where appropriate.

C. Evidence Handling

1. Suspected contaminated material should be placed in proper containers and labeled with a biohazard emblem.

2. Contaminated evidence should be stored properly to prevent contamination of other items.

3. Contaminated evidence should be labeled with a biohazard emblem to warn anyone who may have contact with this evidence, such as lab personnel, medical examiner personnel, prosecutors, and anyone else who may have contact.

6. ARREST AND INCARCERATION AND SPECIFIC SAFETY PRECAUTIONS.

A. Arrest

1. Protective gloves should be worn when handling persons believed to carry an infectious disease.

2. Safe search techniques should be utilized to avoid contact with contaminated body fluids or sharp objects. Needle sticks are a possible source of contamination and should be avoided.

B. Transportation

1. Special transportation options or measures should be considered for transporting prisoners suspected of being contaminated and/or who are soiled with blood or body fluids. This may include the use of a plastic sheet as a seat cover, or solitary transportation of prisoners contaminated with body fluids.

2. All vehicles used in such circumstances and prisoner clothing shall be properly decontaminated.

7. TREATING MEDICAL EMERGENCIES.

A. Use protective gloves and clothing as necessary to prevent contamination with blood or body fluids while treating patients.

B. Use safe resuscitation equipment and decontamination procedures when administering CPR with a one-way CPR mask.

C. Properly dispose of contaminated waste used to treat patients, such as gloves, airways, and other equipment.

8. DEATH SCENE PROCESSING.

A. Wear appropriate protective gloves and clothing as necessary to prevent direct contact with blood and body fluids.

B. Prior to transporting a body suspected of being contaminated with an infectious disease, notify the receiving agency.

C. Follow necessary decontamination procedures for personnel and the scene.

9. PERSONAL PROTECTIVE EQUIPMENT. When an employee has an anticipated exposure to a bloodborne pathogen and the exposure can not be controlled through redesign of work facilities, mechanical devices or barriers that isolate people from potentially infectious materials, or work practice controls, then personal protective equipment shall be provided.

A. The equipment shall be provided at no cost to the employee and shall be decontaminated and/or replaced as necessary.

B. Employees shall wear appropriate personal protective equipment whenever there is a potential for an exposure. Personal protective equipment is appropriate if it does not permit blood or other potentially infectious materials to pass through and come in contact with the employee's street clothes, undergarments or skin.

C. Personal protective equipment selected shall be appropriate for the anticipated exposure. Some examples of personal protective equipment are latex (surgical) gloves, surgical masks, disposable mouthpiece for CPR, face-shields, disposable coveralls, and disposable boots.

D. If the personal protective equipment is penetrated by blood or other potentially infectious materials, the personal protective equipment shall be removed immediately or as soon as feasible. All personal protective equipment shall be removed before leaving the work area, and placed into an appropriate designated area or container for storage, washing, decontamination, and/or disposal.

E. If gloves are used for protection, the following precautions shall be taken:

a. Disposable gloves shall be replaced as soon as possible when contaminated.

b. Disposable gloves shall not be washed or decontaminated for reuse.

c. Reusable gloves may be decontaminated for reuse if the integrity of the glove is not compromised. Reusable gloves shall be thrown away if the glove is contaminated, cracked, torn, punctured, or when their ability to function as a barrier is compromised.

F. Masks, eye and face protection shall be worn when there is an anticipated exposure to splashing, spraying, spatter of blood or other potentially infectious materials.

G. Other body protection such as disposable coveralls, over-boots and aprons shall be worn when there is an anticipated exposure to blood or other potentially infectious materials.

10. HOUSEKEEPING. Work sites shall be maintained in a clean and sanitary condition. When warranted, due to risks of contamination, a supervisor shall determine and implement

an approved written schedule for cleaning and method for decontamination. If the anticipated exposure is in the field, a supervisor shall determine if and where decontamination exists and whether it is necessary to implement the appropriate actions.

- A. All equipment and environment, including work surfaces, shall be cleaned and decontaminated after known or suspected contact with blood or other potentially infectious materials occurs.
- B. All protective coverings, such as plastic wrap used to cover equipment shall be removed as soon as feasible.
- C. All bins, cans, pails or similar devices which are anticipated to become contaminated shall be visually inspected and cleaned on a regular schedule. Except if there is visible contamination they shall be cleaned immediately.
- D. All refuse anticipated to be contaminated with blood or other potentially infectious materials shall be handled with a mechanical device.

11. WASTE MANAGEMENT. Whenever it is necessary to prevent the spread of a known or potential infectious disease, a waste management program will be implemented. The program will be implemented as soon as the potential exposure is discovered. The city will use red plastic bags, identified with the BIOHAZARD label for contamination containers. Unless the contaminated materials are evidence, (which will be retained for use in a criminal proceeding) the containers shall be transported to the appropriate disposal site.

- A. When personal protective equipment is removed it shall be placed in an appropriate biological hazard container. The container shall be:
  - 1. Closable.
  - 2. Constructed to contain all contents and prevent leakage of fluids.
  - 3. Labeled biohazard and colored red.
  - 4. Closed prior to removal.
- B. Disposal of all infectious waste shall be done in accordance with all federal, state, and local requirements.

12. DECONTAMINATION AND LAUNDRY. Decontamination of employees, equipment, materials, and the environment shall be done immediately or as soon as practical, upon discovery of the contamination. Decontamination means, the washing of the body,

equipment, materials, and the environment so as not to have any contamination with blood or other potentially infectious materials.

- A. The minimum acceptable level of decontamination is washing with soap and water. Depending on the type of contamination, more aggressive measures may need to be taken such as use of commercially prepared agents or a 1:9 solution of household chlorine bleach and water.
  - B. If an employee's clothes become contaminated, the employee shall immediately, or as soon as feasible, remove all contaminated clothing and wash with soap and water. If contamination of an employee's clothes results in exposure of the employee's non-intact skin or mucus membranes to blood or potentially infectious materials, the employee should be transported to the nearest hospital or the nearest appropriate facility for evaluation. If the employee is required to enter a vehicle while contaminated, both the employee and vehicle shall be decontaminated prior to being put back into service.
  - C. All clothing and equipment considered for decontamination shall be placed in a container which is clearly marked and identified with the appropriate BIOHAZARD label, and transported to an approved commercial laundry with employees trained in universal precautions. Washing in 160 degree F. water for at least 25 minutes with chlorine bleach is effective.
  - D. Only authorized personnel shall be qualified to transport contaminated containers.
13. HEPATITIS B. VACCINATION INFORMATION.

A. All employees who have a reasonably anticipated occupational exposure to hepatitis B and have received training in accordance with OAR 437.1910.1030(g) shall be offered the opportunity to receive the hepatitis B vaccination series, and any boosters as recommended by law. Receiving the hepatitis B series is not mandatory, nor is it a bona fide occupational qualification.

B. The hepatitis B vaccination series shall be offered to all employees within 10 days of initial assignment, unless the employee has previously received the complete hepatitis B series. Antibody testing may be performed to determine if the employee

is immune to hepatitis B, or that the vaccine is contradicted for medical reasons. Such additional testing shall be the decision of the County's Health Officer.



C. An employee may decline to receive the hepatitis B series initially, and later change his/her mind and receive the series at any time the employee performs duties where there is a reasonably anticipated occupational exposure to hepatitis B.

D. If any employee declines to receive the hepatitis B vaccination series, the employee shall sign a statement indicating the declination, which states:

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus ("HBV") infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

14. CLANDESTINE DRUG LABORATORIES. Illegal drug laboratories located anywhere, but particularly in residential areas pose a serious health, fire, and explosion hazard potential. The utmost of caution is necessary to any member responding to a report of, or locating a suspected laboratory. Usually abandoned, you will generally have to depend on information received from the dispatcher or complainant, smell emitting from the scene, and/or labeling of containers in the area. These factors should alert a responding officer that a serious health and safety hazard might be present.

A. Clear the scene of bystanders and establish a secure perimeter.

B. Notify dispatch that you have a "possible drug lab" and request the fire department be dispatched.

C. Notify your patrol supervisor immediately and keep the scene secure until the arrival of the fire department.

D. The responding supervisor, after confirmation of a drug lab, will notify the Westside Interagency Drug Team and the patrol Lieutenant who will notify appropriate command staff. The Chief of Police or his designee must approve financial commitments for costs of clean up.

E. The Hazardous Material Response Team from Tualatin Valley Fire and Rescue will be responsible for necessary decontamination.

F. All police department supervisors will take reasonable precautions to protect department personnel from known or suspected health hazards.

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Chief of Police

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Date